

DEC 17 2004

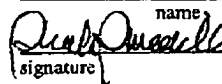
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:	KEITH O. COWAN ET AL)	
)	
SERIAL NO.:	10/743,848)	ART UNIT:
)	3731
FILED:	December 22, 2003)	
)	
FOR:	METHODS, SYSTEMS AND STORAGE)	EXAMINER:
	MEDIUM FOR DISTRIBUTING CONTENT))	Not Yet
	BASED ON USER COMMUNITIES)	Assigned

I hereby certify that this correspondence is
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Number 703-872-9306 on December 17, 2004

Sheila Smedick

name



signature

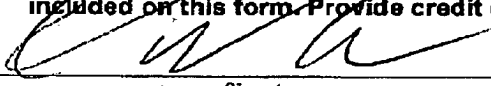
12-17-04

date

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL PRELIMINARY AMENDMENT

Prior to examination of the present application, please amend the application as follows:

AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. 030506 (BLL-0135)	
Applicant(s): KEITH O. COWAN ET AL					
Application No. 10/743,848	Filing Date 12/22/2003	Examiner Not Yet Assigned	Customer No. 36192	Group Art Unit 3731	Confirmation No. 9081
Invention: METHODS, SYSTEMS AND STORAGE MEDIUM FOR DISTRIBUTING CONTENT BASED ON USER COMMUNITIES					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	21 -	21 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0 x	\$44.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment.					
<input type="checkbox"/> Please charge Deposit Account No. 06-1130 in the amount of					
<input type="checkbox"/> A check in the amount of to cover the filing fee is enclosed.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 06-1130					
<input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 <i>Signature</i>			Dated: December 17, 2004		
David A. Fox Registration No. 38,807 CANTOR COLBURN LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone (860) 286-2929 Facsimile (860) 286-0115 Customer No. 36192			<div style="border: 1px solid black; padding: 5px;"><p>I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</p><p style="text-align: center;">_____ (Date)</p><p style="text-align: center;">_____ <i>Signature of Person Mailing Correspondence</i></p><p style="text-align: center;">_____ <i>Typed or Printed Name of Person Mailing Correspondence</i></p></div>		
cc:					

P11SMALL/REV08